

Greenbelt, Maryland 20770 phone: 301-459-7590, fax: 301-577-5575 internet: www.jsitel.com, e-mail: jsi@jsitel.com

October 11, 2013

VIA Electronic Comment Filing System

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, SW Washington, DC 20554

Re: WC Docket No. 11-42

2013 ETC Annual Report of Palmetto Telephone Communications, LLC

Study Area Code 249023

Dear Ms. Dortch:

On behalf of Palmetto Telephone Communications, LLC "Palmetto", JSI files the attached FCC Form 481 ETC annual reporting information pursuant to section 54.422 of the Commission's rules.¹ Palmetto Telephone Communications is an ETC for low-income support only.

Please direct any questions regarding the filing to the undersigned.

Sincerely,

John Kuykendall JSI Vice President

301-459-7590

jkuykendall@jsitel.com

				FCC Form 481
				OMB 3060-0986
FCC For	m 481 - Carrier Annual Reporting			OMB 3060-0819
Data Co	llection Form		Avg. Burden Estimate per R	tespondent: 20 Hours
0.1.0				
<010>	Study Area Code	249023		
<015>	Study Area Name	Palmetto Telephone Communications, LLC		
ر د ۱	Dragram Vaar	2014		
<020>	Program Year	2014		
<030>	Contact Name: Person USAC should contact	Valerie Ancrum		
	with questions about this data			
<035>	Contact Telephone Number:	8435389383		
	Number of the person identified in data line <030>			
<039>	Contact Email:	valerie.ancrum@prtc.coop		
	Email of the person identified in data line <030>			
			54.313	54.422
			Completion	Completion
ANNUA	L REPORTING FOR ALL CARRIERS		Required	Required
			(check box wi	hen complete)
<100>	Service Quality Improvement Reporting	(complete attached worksheet)		
	Outage Reporting (voice)	(complete attached worksheet)		n/a
<210>	< check box if no outa	ages to report		
<300>	Unfulfilled Service Requests (voice)			
<310>	Detail on Attempts (voice)	(attach descriptive document)		
	Unfulfilled Service Requests (broadband)	(attach descriptive document)		
<330>	Detail on Attempts (broadband)	(attach descriptive document)		
	, , , , , , , , , , , , , , , , , , ,	,		
<400>	Number of Complaints per 1,000 customers (voice)	_		n/a
<410>	Fixed			
<420>	Mobile	_		
	Number of Complaints per 1,000 customers (broadband)	-		
<440>	Fixed	_		
<450>	Mobile			
<500>	Service Quality Standards & Consumer Protection Rules C	Compliance (about to indicate autification)		n/a
<510>	Service Quality Standards & Consumer Protection Rules C	Compliance (check to indicate certification) (attached descriptive document)		n/a
	Functionality in Emergency Situations	(check to indicate certification)		n/a
<610>	Tunestonant, in Emergency distantions	(attached descriptive document)		n/a
	Company Price Offerings (voice)	(complete attached worksheet)		,
	Company Price Offerings (broadband)	(complete attached worksheet)		
<800>	Operating Companies and Affiliates	(complete attached worksheet)		Х
<900>	Tribal Land Offerings (Y/N)? No	(if yes, complete attached worksheet)		
<1000>	Voice Services Rate Comparability	(check to indicate certification)		
<1010>		(attach descriptive document)		
<1100>	Terrestrial Backhaul (Y/N)? Yes	(if not, check to indicate certification)		
<1110>		(complete attached worksheet)		
<1200>	Terms and Condition for Lifeline Customers	(complete attached worksheet)		Х
	Price Cap Carriers, Proceed to Price Cap Additional Docu	umentation Worksheet		
	Including Rate-of-Return Carriers affiliated with Price Cap	Local Exchange Carriers		
<2000>		(check to indicate certification)		
<2005>		(complete attached worksheet)		
	Rate of Return Carriers, Proceed to ROR Additional Doc	umentation Worksheet		
<3000>	5. Hetain carriers, Freecou to Hon Additional Doct	(check to indicate certification)		
<3005>		(complete attached worksheet)		

(800) Op	erating Companies and Affiliates	The state of the state of	FCC Form 481
Data Col	lection Form		OMB Control No. 3060-0986 OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	249023	
<015>	Study Area Name	Palmetto Telephone Commun	ications, LLC
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Valerie Ancrum	
<035>	Contact Telephone Number - Number of person identified in data line <030>	8435389383	
<039>	Contact Email Address - Email Address of person identified in data line <030>	valerie.ancrum@prtc.coop	
<810>	Reporting Carrier Holding Company	Palmetto Telephone Commun	
<812>	Operating Company	Palmetto Rural Telephone Cor	
40122	Operating company	Palmetto Telphone Communic	ations, LLC
<813>	<al></al>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
	Pelmetto Rural Telephone Cooperative, Inc.	240536	PRTC
		210330	PRIC
			0
-:			

(1200) To Lifeline	erms and Condition for Lifeline Customers			FCC Form 481 OM8 Control No. 3060-0986 OM8 Control No. 3060-0819
Data Col	ection Form	HILLENT.		July 2013
<010>	Study Area Code		249023	
<015>	Study Area Name		Palmetto Telephone Communications, LLC	
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<035>	Contact Telephone Number - Number of person identified in data li	ne <030>	8435389383	
<039>	Contact Email Address - Email Address of person identified in data li	ne <030>	valerie.ancrum@prtc.coop	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	Name of a	249023sc1210 attached document (.pdf)	
<1220>	Link to Public Website	НТТР		
	Please check these boxes below to confirm that the attached PDF, on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting fo ETCs receiving low-income support, carriers must annually report:	r		
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	х		
<1222>	Details on the number of minutes provided as part of the plan,	x		
<1223>	Additional charges for toll calls, and rates for each such plan.	х		

Palmetto Telephone Communications, LLC

SAC: 249023

Line Number: 1220

2013 Lifeline Guidelines

- Lifeline is a federal benefit and willfully making false statements to obtain the benefit can result in de-enrollment, fines and prosecution.
- Only one Lifeline benefit is available per household.
- A household is defined, for purposes of the Lifeline program, as any individual or group of individuals who live together at the same address and share income and expenses.
- A household may not receive Lifeline benefits from multiple providers.
- If a household receives more than one Lifeline benefit, it will be de-enrolled from the program.
- The Lifeline benefit may not be transferred to any other person.

Qualifying Methods

A subscriber may qualify for Lifeline either because he/she or someone in his/her household participates in one of the programs below or because your income is within the following guidelines. NOTE: A subscriber may receive Social Security and Medicare benefits, but to qualify for Lifeline, must receive benefits from one of the following programs or income must fall within the guidelines.

Program Eligibility

- Supplemental Nutrition Assistance Program (SNAP)
- Federal Public Housing/Section 8
- Medicaid
- Supplemental Security Income (SSI)
- National School Lunch (NSL) free lunch program
- Low Income Home Energy Assistance Program (LIHEAP)
- Temporary Assistance for Needy Families (TANF)

Income Eligibility for 2013

Annual Income 135% Thresholds Based on Household Size								
1	2	3	4	5	6	7	8	For each add'l person
\$15,512	\$20,939	\$26,366	\$31,793	\$37,220	\$42,647	\$48,074	\$53,501	+ \$5,427/person

(Note: You will need to provide 3 of your most recent paystubs from the previous 12 months, Social Security Benefit Letter or W-2.)

The subscriber understands that:

- 1. His/Her household meets the income-based or program-based eligibility criteria for receiving Lifeline, shown above. If annual income exceeds 135% of the Federal Poverty Guidelines, the subscriber will notify the provider.
- 2. He/She will notify the provider within 30 days if for any reason he/she no longer qualifies to receive Lifeline.
- 3. He/She will notify the provider within 30 days if he/she moves to a new address or he/she will verify every 90 days that the temporary address is still current.
- 4. He/She must certify that his/her household is not receiving any other Lifeline benefit and will not apply for an additional one from another wireline or wireless carrier.
- 5. Giving fraudulent information is punishable by law.
- He/She may be required to re-certify my continued eligibility for Lifeline and that my failure to re-certify will result in de-enrollment.

Before enrolling in Lifeline, the subscriber will authorize the provider to release his/her information contained in his/her Lifeline Application to the FCC or its designee, including the Universal Service Administrative Company, and to any state and federal agency, as required by law.

Pricing

By enrolling in Lifeline, the subscriber will receive \$9.25 credit from Federal and \$3.00 credit from State towards his/her local service of \$14.35. The total credit of \$12.25 may be applied towards local service on POTS or bundle packages. If a subscriber chooses to have toll calls, they can subscribe to 12 cents per minute, 6 cents per minute and \$3.95 per month, or unlimited minutes for \$25.90. The subscriber will be able to make unlimited local calls.

OMB Control N	15 (11) (2)	FCC Form 481	The state of the s	Certification - Reporting Carrier
July 2013	. 3060-0986	OMB Control No. 3060-098		Data Collection Form
July 2013	. 3060-0819	OMB Control No. 3060-081		
		July 2013		

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<039>	Contact Email Address - Email Address of person identified in data line <030>	yalerie,ancrum@prtc.coop

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

I certify that I am an officer of the reporting carrier; my responsibiliti and, to the best of my knowledge, the information reported on this i		g requirements for universal service support recipler
Name of Reporting Carrier: Palmetto Telephone Communications, LLC		
Signature of Authorized Officer:	lother	Date 9/34/2013
Printed name of Authorized Officer: Dewaine J. Wilson		
Title or position of Authorized Officer: Chief Financial Officer		
Telephone number of Authorized Officer: 843-538-9382		
Study Area Code of Reporting Carrier: 249023	Filing Due Date for this form:	10/15/2013
Persons willfully making false statements on this form can be puni unde	ished by fine or forfeiture under the Communications Act of 19 er Title 18 of the United States Code, 18 U.S.C. § 1001.	34, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment